

1 Centennial Square Victoria, BC V8W 1P6 250.361.0572 businesslicence@victoria.ca victoria.ca

Transient Accommodation Business Licence Application

For information, or assistance completing this form, please contact Business Licensing at 250.361.0572 or by email at businesslicence@victoria.ca. You can mail your completed application to the above address, fax it to 250.361.0214 or email it to the email address noted above.

IMPORTANT: Applications must be completed in full and accompanied by appropriate documentation. Incomplete forms will not be processed. Completion of this application does not guarantee approval of the application. Approved licences will be issued only upon receipt of payment of the business licence fee. Conducting business without a valid licence is an offence for which penalties are prescribed. The minimum penalty is a fine of \$250 per day for each day that the offence continues, pursuant to Sec. 4(a) of the Business Licence Bylaw.

Part A: Property Information	
Property Address:	Victoria, BC Postal Code:
Type of Accomodation (CHECK ONE)	
☐ Hotel ☐ Hostel	
☐ Motel ☐ Bed & Breakfast	
Number of Rooms Being Used For Transient A	Accomodation:
Coin Operated Machines	
# of washers and dryers	units X \$11.00 per unit =
# of other machines	units X \$15.00 per unit =
Total number of machines	Total fees: \$
	erate the business on your own, either under your own name or a business name):
Limited/Incorporated company name: (and your personal assets):	(If you plan to operate the business as a separate legal entity, separate from yourself
Mailing address:(APARTMENT / UNIT # / STREET ADDR	RESS)
Phone number:	Email:



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Incorporation Information: (if applicable)	
Incorporation number:	
If applying as a Limited/Incorporated Company, have you included d	locuments of Incorporation and Notice of Articles?
Yes	
I authorize the City of Victoria to obtain the documents of Incapplicable taxes will be charged by the City of Victoria for this	corporation and Notice of Articles and acknowledge that a \$30 fee plus s service [Administrative Fees Bylaw No. 04-40].
Applicant / Representative Signature:	Date Signed:
	(DAY/MONTH/YEAR)
IMPORTANT: In providing this information, you have consented to information provided herein is correct. Applicant has read and agree Business Licence Bylaw and all other applicable City Bylaws. Licence	es to comply with the stated regulations and requirements of the
Part C: Approval Process (For Office Use Only) Processed By:	Date Signed:
	(DAY/MONTH/YEAR)